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http://www.dmas.state.va.us

MEDICAID MEMO

TO: All Pharmacy, Medical Providers, Dental Providers, and

Managed Care Organizations Participating in the Virginia

Medical Assistance Programs

FROM: Patrick W. Finnerty, Director MEMO: Special

Department of Medical Assistance Services (DMAS)

DATE: 2/29/08

SUBJECT: Update on Tamper-Resistant Prescription Pad Requirements Effective

April 1, 2008 and National Provider Identifier (NPI) Compliance for

Pharmacy Claims Processing Effective May 23, 2008

The purpose of this memorandum is to inform you that Congress enacted a new law that mandates the use of tamper-resistant prescription pads for most outpatient prescriptions written for fee-for-service FAMIS and Medicaid enrollees. The mandate becomes effective April 1, 2008. This memorandum also reminds you that mandatory compliance for the use of National Provider Identification (NPI) becomes effective May 23, 2008.

Tamper-Resistant Prescription Pads

In 2007, Congress enacted Section 7002 (b) of the U.S. Troop Readiness, Veterans' Health Care, Katrina Recovery and Iraq Accountability Appropriations Act (P.L. 110-28), which mandates that federal reimbursement be denied to states for Medicaid patients' outpatient prescriptions that are not written on tamper-resistant prescription pads/paper. To comply with this federal mandate, the Virginia Medicaid and FAMIS Fee-For-Service Program will require the use of tamper-resistant pads/paper on all non-electronic, outpatient prescriptions (excluding e-prescribing, fax, or telephone), effective April 1, 2008.

Affected Medicaid/FAMIS Clients

For prescriptions written on or after April 1, 2008, the use of tamper-resistant prescription pads is mandated for the Medicaid, MEDALLION, FAMIS, and FAMIS Plus fee-for-service populations. Based on CMS guidance, the tamper-resistant pad requirement applies to all outpatient drugs, including over-the-counter drugs, whether Medicaid is the primary or secondary payor of the prescription. This includes prescriptions for "dual eligibles" where a

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Medicare Part D plan is the primary payor and Virginia Medicaid is the secondary payor. While the law specifies the term "prescription pad", the Centers for Medicare and Medicaid Services (CMS) have stated that these requirements also apply to computer-generated prescriptions that are printed using paper inserted into the printer.

Exemptions to Requirement

According to CMS, the following are <u>exemptions</u> to the tamper-resistant prescription pad requirements:

- Prescriptions paid by a Medicaid/FAMIS managed care entity (this means prescriptions written for patients enrolled in any of Virginia's contracted managed care organizations

 Anthem, Virginia Premier, AmeriGroup, CareNet, and Optima -- are not subject to this requirement);
- Prescriptions transmitted to the pharmacy via e-prescribing, fax, or telephone. Faxing is the preferred method. (Please note, however, that Drug Enforcement Administration regulations require Schedule II controlled substances to be written prescriptions); In addition, Guidance Document 110-35 from the Virginia Board of Pharmacy, http://www.dhp.virginia.gov/Pharmacy/guidelines/110-35%20Requirements%20for%20prescriptions.doc, provides further guidance on faxed and electronically transmitted prescriptions.);
- Drugs provided in nursing facilities, intermediate care facilities for the mentally retarded, and other specified institutional and clinical settings, as long as the patient never has the opportunity to handle the written prescription; and
- Refills of written prescriptions presented at a pharmacy before April 1, 2008.

Key Implementation Issues

DMAS will take the following actions to ease the transition to tamper-resistant prescription pads:

- DMAS will provide payment for out-of-state prescriptions filled by Virginia pharmacists so long as the written prescription is on a tamper-resistant pad that meets at least one of the required characteristics listed below.
- DMAS will authorize payment for prescriptions that are filled when presented on a non-compliant prescription drug pad so long as the pharmacy receives a verbal, faxed, electronic or compliant written prescription within 72 hours after the date on which the prescription was filled. **Faxing is the preferred method.**

What Qualifies As A Tamper-Resistant Prescription Pad?

Although this is a federal law, there is not a single national regulation. Each State Medicaid Agency must determine which tamper-resistant features will be required. Virginia Medicaid has reviewed the recommendations of the industry and of states that currently use tamper-resistant prescription pads/paper. Effective April 1, 2008, Virginia Medicaid will require that all

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prescriptions pads/paper used for Medicaid and FAMIS fee-for-service recipients contain at least one of the following three characteristics:

- 1) One or more industry-recognized features designed to prevent unauthorized copying of a completed or blank prescription form,
- 2) One or more industry-recognized features designed to prevent the erasure or modification of information written on the prescription by the prescriber, or
- 3) One or more industry-recognized features designed to prevent the use of counterfeit prescription forms.

By October 1, 2008, prescription pads/paper will be required to contain at least one feature in **all** of the three categories above. Virginia Medicaid encourages providers to implement all security features by April 1, 2008, if possible, to avoid wasting old pads/paper and having to reorder new pads/paper with the additional features prior to October 1, 2008. Providers who write prescriptions for Medicaid and FAMIS recipients should contact their vendor to secure an appropriate supply of prescription pads/paper that will meet the above requirements and begin to use these pads/paper prior to April 1, 2008. Orders may take up to four (4) weeks to process.

Attached is a summary of features that could be used on a tamper-resistant pad/paper in compliance with the CMS guidelines within the timeframe required. They are categorized according to the three types of tamper-proof features as described by CMS. Features in bold tend to be less costly and easier for physicians to implement than other features.

Additional Information

A web page has been established on the DMAS web site to offer additional information on this mandate: http://www.dmas.virginia.gov/pharm-news.htm. The web page contains a link to CMS' Frequently Asked Questions concerning the tamper-resistant prescription pad mandate.

Providers and recipients can also contact the First Health Services Clinical Call Center at 1-800-932-6648 (available 24 hours a day, seven days a week) with questions specifically regarding submission of appropriate prescriptions.

National Provider Identification (NPI) Mandatory Compliance

Effective May 23, 2008, all Virginia Medicaid providers are required to share their NPI with DMAS and submit NPIs on all transactions. Pharmacy providers are responsible for obtaining and submitting prescribers' NPIs when processing pharmacy claims. As of December 2007, only 5% of Virginia Medicaid's pharmacy claims were submitted with the prescriber's NPI. As we approach the final NPI compliance date of May 23, 2008, it is critical that pharmacy providers begin to adopt this practice to ensure that claims payments are not denied.

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WE URGE PHARMACY PROVIDERS TO IMMEDIATELY BEGIN UTILIZING THEIR PROVIDER NPI AND SUBMITTING THE PRESCRIBER'S NPI ON ALL VIRGINIA MEDICAID PHARMACY CLAIMS. EFFECTIVE MAY 23, 2008, PHARMACY CLAIMS THAT DO NOT HAVE NPIS IN <u>BOTH</u> THE PHARMACY PROVIDER AND PRESCRIBER FIELDS WILL BE DENIED.

There are several resources available to identify the appropriate NPI for prescribers:

- CMS/ NPPES Registry https://nppes.cms.hhs.gov/NPPES/ (searchable database) OR https://nppesdata.cms.hhs.gov/ (to download file)
- DMAS Prescriber Identification List http://www.dmas.virginia.gov/pr-provider no.asp?redir=pr-prescriber id list.htm
- Virginia Medicaid Pharmacy Clinical Call Center (800) 932-6648

When submitting real-time (Point-of-Sale) claims transactions, the 10-digit NPI for the Prescriber ID and Provider ID must be sent with the Qualifier '01'. Please see the following link for the NCPDP Companion Guide, which will provide instructions for submitting claims with the appropriate Qualifier: https://virginia.fhsc.com/documents/NCPDP51 NPI-v12-20070606.pdf

As a healthcare provider, you should have already obtained an NPI from NPPES (https://nppes.cms.hhs.gov), and enrolled your NPI with DMAS. If you have not shared your NPI with DMAS, you should contact the First Health Provider Enrollment Unit (PEU) at 1-888-829-5373 (toll free) for instructions.

Contact the Virginia Medicaid Pharmacy Clinical Call Center at (800) 932-6648 or send an email message to MPI@dmas.virginia.gov for further questions related to the use of NPI in pharmacy claims processing. Thank you for your immediate attention to this matter as we prepare for the termination of the dual use period (Utilization of NPI or Legacy Medicaid Provider Identification Number (PIN)) on May 23, 2008.

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Attachment

Note: Features in bold tend to be less costly and easier for physicians to implement than other features.

Category 1 - One or more industry-recognized features designed to prevent unauthorized copying of a completed or blank prescription form.

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Feature	Description
Uniform non-white	Background is one color. This will inhibit a forger
background color	from physically erasing written or printed
	information on a prescription form. If someone
	tries to erase or copy, the consistent background
	color will look altered.
"Void" or "Illegal" pantograph	The word "Void" appears when the prescription is
	photocopied. Due to the word "Void" on faxed
	prescriptions, this feature requires the pharmacy to
	document if the prescription was faxed.
Reverse "RX" or White Area	"Rx" symbol or white area disappears when
on prescription	photocopied at light setting. This feature is normally
	paired with the "Void" pantograph to prohibit
	copying on a light setting.
Coin-reactive ink	Ink that changes color when rubbed by a coin. This is
	an expensive option.
Security Back print	Printed on the back of prescription form. The most
	popular wording for the security back print is
	"Security Prescription" or the security back print can
	include the states name.
Watermarking (fourdrinier)	Special paper containing "watermarking".
Diagonal lines (patented	Diagonal lines with the word "void" or "copy". Can
"Void")	be distracting or expensive.
Micro printing	Very small font writing, perhaps acting as a signature
	line. This is difficult to photocopy and difficult to
	implement if using computer printer. It is also
	difficult for a pharmacist to see.

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Category 2 - One or more industry-recognized features designed to prevent the erasure or modification of information written on the prescription by the prescriber.

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Feature	Description
Quantity check off boxes	In addition to the written quantity on the
	prescription, Quantities are indicated in ranges. It
	is recommended that ranges be multiples of 25 with
	the highest being "151 and over". The range box
	corresponding to the quantity prescribed MUST be
	checked for the prescription to be valid.
Refill Indicator (circle or	Indicates the number of refills on the prescription.
check number of refills or	Refill number must be used to be a valid
"NR")	prescription.
Pre-print "Rx is void if more	Reduces the ability to add medications to the
than Rxs on paper" on	prescription Line must be completed for this
prescription paper	feature to be valid. Reduces the ability to add
	medications to the prescription. Computer printer
	paper can accommodate this feature by printing
	"This space intentionally left blank" in an empty
	space or quadrant.
Quantity Border and Fill (for	Quantities are surrounded by special characters
computer generated	such as an asterisk to prevent alteration, e.g. QTY
prescriptions on paper only)	**50** Value may also be expressed as text, e.g.
	(FIFTY), (optional)
Refill Border and Fill (for	Refill quantities are surrounded by special
computer generated	characters such as an asterisk to prevent alteration,
prescriptions on paper only)	e.g. QTY **5** Value may also be expressed as
	text, e.g. (FIVE), (optional)
Chemically reactive paper	If exposed to chemical solvents, oxidants, acids, or
	alkalis to alter, the prescription paper will react
	and leave a mark visible to the pharmacist.
Paper toner fuser	Special printer toner that establishes strong bond to
	prescription paper and is difficult to tamper.
Safety or security paper with	White (or some other color) mark appears when
colored pattern	erased. This is expensive paper.

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Category 3 - One or more industry-recognized features designed to prevent the use of counterfeit prescription forms.

Feature	Description
Security features and	Complete list of the security features on the
descriptions listed on	prescription paper for compliance purposes. The
prescriptions	pharmacy community, as represented by the
	American Pharmacist Association (APhA),
	National Association of Chain Drug Stores
	(NACDS), and National Community Pharmacist
	Association (NCPA) strongly believe this feature
	would be helpful to include to aid the pharmacist
	in identifying a tamper-resistant prescription.
Form Batch Numbers	Each batch of prescriptions has a unique identifier.
	This feature is only effective in states with an
	approved vendor listing.
Serial number	Number issued by printer of prescription, may or may
	not be sequential. This feature is most effective where
	serial numbers are reported to the state.
Encoding techniques (bar	Bar codes on prescription. Serial number or Batch
codes)	number is encoded in a bar code.
Logos	Sometimes used as part of the background color or
	pantograph.
Metal stripe security	Metal stripe on paper, difficult to counterfeit.
Heat sensing imprint	By touching the imprint or design, the imprint will
	disappear.
Invisible fluorescent fibers/ink	Visible only under black light.
Thermo chromic ink	Ink changes color with temperature change. This is
	expensive paper and problematic for storage in areas
	not climate controlled.
Holograms that interfere with	May interfere with photocopying or scanning.
photocopying	